

**DECLARATION AND POWER OF ATTORNEY
FOR PATENT APPLICATION**ATTORNEY DOCKET NO. 200208463-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SPECULATIVE EXPECTATION BASED EVENT VERIFICATION

the specification of which is attached hereto unless the following box is checked:

() was filed on _____ as US Application No. or PCT International Application
Number _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understood the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above. I acknowledge the duty to disclose all information which is material to patentability as defined in 37 CFR 1.56.

Foreign Application(s) and/or Claim of Foreign Priority

I hereby claim foreign priority benefits under Title 35, United States Code Section 119 of any foreign application(s) for patent or inventor(s) certificate listed below and have also identified below any foreign application for patent or inventor(s) certificate having a filing date before that of the application on which priority is claimed:

COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119
			YES: _____ NO: _____
			YES: _____ NO: _____

Provisional Application

I hereby claim the benefit under Title 35, United States Code Section 119(e) of any United States provisional application(s) listed below:

APPLICATION NUMBER	FILING DATE

U. S. Priority Claim

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

APPLICATION NUMBER	FILING DATE	STATUS (patented/pending/abandoned)

POWER OF ATTORNEY:

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Customer Number 022879Place Customer
Number Bar Code
Label hereSend Correspondence to:
HEWLETT-PACKARD COMPANY
Intellectual Property Administration
P.O. Box 272400
Fort Collins, Colorado 80527-2400

Direct Telephone Calls To:

John C. Moran, Esq.
(970) 898-7010

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Inventor: John Warren Maly Citizenship: USAResidence: 13500 Owl Canyon Trail, LaPorte, Colorado 80535Post Office Address: 13500 Owl Canyon Trail, LaPorte, Colorado 80535

Inventor's Signature

Date

11/11/03

When recorded please return to:
HEWLETT-PACKARD COMPANY
Intellectual Property Administration
P. O. Box 272400
Fort Collins, Colorado 80527-2400

PATENT APPLICATION
ATTORNEY DOCKET NO. 200208463-1

ASSIGNMENT OF PATENT APPLICATION (cont.)

IN WITNESS WHEREOF, I/we hereunto set my/our hand(s) and seal(s):


 Date Assignment Signed: 11/11/03
Inventor's Signature (Seal)

Inventor's Typed Name: Ryan Clarence Thompson Date Application Signed: 11/11/03

State of Colorado)
) ss.:
County of)

Before me this ____ day of _____, personally appeared Ryan Clarence Thompson who is personally known or proved to me on the basis of satisfactory evidence to be the person who acknowledged the foregoing instrument of assignment to be his/her free act and deed.

Notary Public
My commission expires:

 Date Assignment Signed: 11-11-2003
Inventor's Signature (Seal)

Inventor's Typed Name: Zachary Steven Smith Date Application Signed: 11-11-2003

State of Colorado)
) ss.:
County of)

Before me this ____ day of _____, personally appeared Zachary Steven Smith who is personally known or proved to me on the basis of satisfactory evidence to be the person who acknowledged the foregoing instrument of assignment to be his/her free act and deed.

Notary Public
My commission expires:

Inventor's Signature (Seal) Date Assignment Signed: _____

Inventor's Typed Name: _____ Date Application Signed: _____

State of)
) ss.:
County of)

Before me this ____ day of _____, personally appeared _____ who is personally known or proved to me on the basis of satisfactory evidence to be the person who acknowledged the foregoing instrument of assignment to be his/her free act and deed.

Notary Public
My commission expires:

**DECLARATION AND POWER OF ATTORNEY
FOR PATENT APPLICATION (continuation)**

ATTORNEY DOCKET NO. 200208463-1

Full Name of joint inventor: Ryan Clarenc Thompson Citizenship: USA

Residence: 443 Sundisk Dr., Loveland, Colorado 80538

Post Office Address: 443 Sundisk Dr., Loveland, Colorado 80538

[Signature] Date 11/11/03
Inventor's Signature

Full Name of joint inventor: Zachary Steven Smith Citizenship: USA

Residence: 337 Leeward Ct., Fort Collins, Colorado 80525

Post Office Address: 337 Leeward Ct., Fort Collins, Colorado 80525

[Signature] Date 11-11-2003
Inventor's Signature

Full Name of joint inventor: _____ Citizenship: _____

Residence: _____

Post Office Address: _____

Inventor's Signature Date

Full Name of joint inventor: _____ Citizenship: _____

Residence: _____

Post Office Address: _____

Inventor's Signature Date

Full Name of joint inventor: _____ Citizenship: _____

Residence: _____

Post Office Address: _____

Inventor's Signature Date

Full Name of joint inventor: _____ Citizenship: _____

Residence: _____

Post Office Address: _____

Inventor's Signature Date

Full Name of joint inventor: _____ Citizenship: _____

Residence: _____

Post Office Address: _____

Inventor's Signature Date